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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/742,268	12/20/2000	Klaus Abraham-Fuchs	P00,1908	7104
26574	7590	07/29/2004	EXAMINER	
SCHIFF HARDIN, LLP PATENT DEPARTMENT 6600 SEARS TOWER CHICAGO, IL 60606-6473			FRENEL, VANEL	
			ART UNIT	PAPER NUMBER
			3626	

DATE MAILED: 07/29/2004

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary

Application No.

09/742,268

Applicant(s)

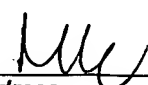
ABRAHAM-FUCHS ET AL.

Examiner

Vanel Frenel

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-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 20 December 2000.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-28 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-28 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
- ☐ Certified copies of the priority documents have been received.
 - ☐ Certified copies of the priority documents have been received in Application No. _____.
 - ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☒ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)
Paper No(s)/Mail Date 4/27/01.
- 4) ☐ Interview Summary (PTO-413)
Paper No(s)/Mail Date. _____.
- 5) ☐ Notice of Informal Patent Application (PTO-152)
- 6) ☐ Other: _____.

DETAILED ACTION

Notice to Applicant

1. This communication is in response to the application filed 12/20/00. Claims 1-28 are pending.


Claim Rejections - 35 USC § 103

2. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

3. Claims 1-28 are rejected under 35 U.S.C. 103(a) as being unpatentable over Hennessy et al (6,277,071) in view of Correa et al (5,882,203).

(A) As per claim 1, Hennessy discloses a method for allowing a patient, suffering from a neurological disease and receiving medication for said disease, to self-monitor the patient's actual state (Col 1, lines 50-67 to Col.2, line 35), comprising the steps of: providing a computer at a location readily accessible to a patient substantially on a daily basis (Col.2, lines 8-67; Col.5, lines 30-67); conducting an interactive procedure between said patient and said computer to acquire information in said computer from the group consisting of information characterizing a motor function of the patient, information characterizing a verbal communication ability of the patient, and information characterizing cognitive abilities of the patient (Col.6, lines 30-67 to Col.7, line 26).



Hennessy does not explicitly disclose making an expert system accessible by said computer and supplying said information from said computer to said expert system and, in said expert system, determining at least one quantified indicator describing an actual state of the patient in the context of the patient's neurological disease; and providing said computer with an output device and making said quantified indicator available to the patient via said output device.

However, these features are known in the art, as evidenced by Correa. In particular, Correa suggests making an expert system accessible by said computer and supplying said information from said computer to said expert system and, in said expert system, determining at least one quantified indicator describing an actual state of the patient in the context of the patient's neurological disease; and providing said computer with an output device and making said quantified indicator available to the patient via said output device (Col.1, lines 4-67 to Col.2, line 67; Col.3, lines 1-41).

It would have been obvious to one of ordinary skill in the art at the time of the invention to have included the feature of Correa within the system of Hennessy with the motivation of providing a self-rating scale which effective in initial screening and removing observer bias (See Correa, Col.1, lines 38-40).

(B) As per claim 2, Correa discloses a method wherein said information comprises information characterizing a motor function of said patient, and wherein the step of conducting an interactive procedure comprises conducting software-controlled motor function exercises for identifying negative and positive effects of said medication on said

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patient's state, and quantifying said negative and positive effects for processing by said expert system for producing said quantified indicator (Col.1, lines 66-67 to Col.2, line 67; Col.3, lines 1-41).

(C) As per claim 3, Correa discloses a method wherein said information is information characterizing a verbal communication ability of said patient, and wherein conducting an interactive procedure comprises acoustically acquiring speech from said patient and assessing said speech with a speech assessment system in said computer containing speech recognition algorithms and a phonetic data bank to obtain an information value quantifying negative and positive effects of said medication on said speech, and supplying said information value to said expert system for processing by said expert system for producing said quantified indicator (Col.1, lines 66-67 to Col.2, line 67; Col.3, lines 1-41).

(D) As per claim 4, Correa discloses a method wherein said information is information characterizing cognitive abilities of the patient, and wherein conducting an interactive procedure comprises generating questions by said computer and requiring a response from said patient to the respective questions and, from said responses, generating an information value quantifying negative and positive effects of said medication on said cognitive abilities of the patient, and supplying said information value to said expert system for processing in said expert system to produce said quantified indicator (Col.1, lines 4-67 to Col.2, line 67; Col.3, lines 1-41).

(E) As per claim 5, Hennessy discloses a method comprising acoustically entering said responses from said patient into said computer (Col.6, lines 12-67).

(F) As per claim 6, Hennessy discloses a method comprising manually entering said responses from said patient into said computer (Col.6, lines 12-67).

(G) As per claim 7, Hennessy discloses a method comprising entering additional information into said computer in said interactive procedure characterizing a subjective state of health of said patient (Col.8, lines 24-67).

(H) As per claim 8, Hennessy discloses a method comprising obtaining a quantified information value representing said information in said interactive procedure, and storing, as stored information with respect to time, at least one of said quantified indicator, said information and said quantified information value after each interactive procedure (Col.7, lines 14-67 to Col.8, line 67).

(I) As per claim 9, Hennessy discloses a method comprising providing said stored information to said expert system, and producing in said expert system an evaluation regarding dosage of said medication based on said stored information and making said evaluation available to the patient at said output device (Col.6, lines 52-67; Col.7, lines 1-67).

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(J) As per claim 10, Hennessy discloses a method wherein said stored information includes said quantified indicator, and wherein said expert system produces said evaluation from an analysis of a curve relative to time of the respective quantified indicators obtained after each interactive procedure (Col.10, lines 61-67 to Col.11, line 21).

(K) As per claim 11, Correa discloses a method further comprising making said chronological curve available to said patient as a displayed curve at said output device (Col.2, lines 33-67 to Col.3, line 41).

(L) As per claim 12, Correa discloses a method comprising storing said evaluation in a memory accessible by said computer (Col.3, lines 15-41).

(M) As per claim 13, Hennessy discloses a method comprising establishing communication between said computer and a physician located remote from said computer, and informing said physician of at least one of said quantified indicator and said evaluation and said information, as transmitted information (Col.7, lines 15-67 to Col.8, line 67; Col.9, line 1-28).

(N) As per claim 14, Hennessy discloses a method comprising transmitting therapy instructions from said physician to said computer based on an examination of said

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transmitted information, and making said therapy instructions available to the patient at said output device (Col.7, lines 1-67).

(O) As per claim 15, Hennessy discloses a method comprising formulating said quantified indicator as a number (Col.7, lines 26-61).

(P) As per claim 16, Hennessy discloses a method comprising formulating said quantified indicator as a statement (Col.7, lines 26-48).

(Q) As per claim 17, Hennessy discloses a system for allowing a patient suffering from a neurological disease and receiving medication for treating said disease, to self-monitor a state of the patient, comprising: a computer readily accessible by the patient disposed at a location at which said patient is present substantially on a daily basis (Col 1, lines 50-67 to Col.2, line 35); at least one software program installed in said computer for operating said computer to execute an interactive procedure with said patient to obtain information selected from the group consisting of information characterizing a motor function of the patient, information characterizing verbal communication abilities of the patient, and information characterizing cognitive abilities of the patient (Col.6; lines 30-67 to Col.7, line 26); an input unit connected to said computer with which said patient interacts during said interactive procedure to supply inputs to said computer from which said information is acquired (Col.6, lines 12-51).

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Hennessy does not explicitly disclose an expert system accessible by said computer, to which said information is supplied, said expert system producing a quantified indicator from said information and making said quantified indicator available to said computer; and an output unit connected to said computer at which said quantified indicator is made available to the patient.

However, these features are known in the art, as evidenced by Correa. In particular, Correa suggests an expert system accessible by said computer, to which said information is supplied, said expert system producing a quantified indicator from said information and making said quantified indicator available to said computer; and an output unit connected to said computer at which said quantified indicator is made available to the patient ((Col.1, lines 4-67 to Col.2, line 67; Col.3, lines 1-41).

It would have been obvious to one of ordinary skill in the art at the time of the invention to have included the feature of Correa within the system of Hennessy with the motivation of providing a self-rating scale which effective in initial screening and removing observer bias (See Correa, Col.1, lines 38-40).

(R) As per claim 18, Hennessy discloses a system wherein said information is information characterizing a motor function of the patient, and wherein said input unit is a manually operated input unit, and wherein said software program operates said computer to execute motor function test exercises and produces a quantified information value quantifying negative and positive effects of said medication on said

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motor function and makes said quantified information value available to said expert system (Col.9, lines 29-67 to Col.10, line 67).

(S) As per claim 19, Correa discloses a system wherein said information is information characterizing verbal communication abilities of the patient, and wherein said input unit is an acoustical input unit, and wherein said software program assesses speech made by said patient into said input unit using speech algorithms and a phonetic data bank, and produces a quantified information value representing said verbal communication abilities, and makes said quantified information value available to said expert system (Col.1, lines 66-67 to Col.2, line 67; Col.3, lines 1-41).

(T) As per claim 20, Correa discloses a system wherein said information is information characterizing cognitive abilities of the patient and wherein said software operates said computer to present questions to said patient and to receive responses from said patient, and produces a quantified information value from said responses quantifying negative and positive effects of said medication on said cognitive abilities, and makes said quantified information value available to said expert system (Col.1, lines 66-67 to Col.2, line 67; Col.3, lines 1-41).

(U) As per claim 21, Hennessy discloses a system comprising a further software program for operating said computer to obtain additional information from said patient characterizing a subjective state of health of said patient (Col.8, lines 24-67).

(V) As per claim 22, Correa discloses a system wherein said software program in each interactive procedure produces a quantified information value from said information, and further comprising a memory accessible by said computer and by said expert system for storing, as stored information relative to time, at least one of said quantified indicator, said information and said quantified information value after each interactive procedure (Col.3, lines 1-41).

(W) As per claim 23, Hennessy discloses a system wherein said expert system produces an evaluation from said stored information with regard to a dosage of said medication (Col.7, lines 1-51).

(X) As per claim 24, Hennessy discloses a system wherein said stored information includes said quantified indicator, and wherein said expert system produces said evaluation by analyzing a chronological curve of respective quantified indicators obtained from successive interactive procedures (Col.7, lines 14-67 to Col.8, line 67).

(Y) As per claim 25, Hennessy discloses a system wherein said computer displays said chronological curve as a displayed curve at said output device (Col.6, lines 52-67; Col.7, lines 1-67).

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(Z) As per claim 26, Hennessy discloses a system further comprising a transmission link from said computer to an external computer located remotely from said computer for transmitting at least one of said evaluation and said quantified indicator to said external computer (Col.7, lines 62-67 to Col.8, line 67).

(AA) As per claim 27, Hennessy discloses a system wherein said software operates said computer to formulate said quantified indicator as a number (Col.7, lines 26-61).

(BB) As per claim 28, Hennessy discloses a system wherein said software operates said computer to formulate said quantified indicator as a statement (Col.7, lines 26-61).

Conclusion


4. The prior art made of record and not relied upon is considered pertinent to applicant's disclosure. The cited but not applied teaches system and method for managing patient medical records (5,772,585), personal patient simulation (6,077,082) and pronunciation measurement device and method (5,857,173). Any inquiry concerning this communication or earlier communications from the examiner should be directed to Vanel Frenel whose telephone number is 703-305-4952. The examiner can normally be reached on 6:30am-5:00pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on 703-305-9588. The fax phone number for the organization where this application or proceeding is assigned is 703-872-9306.

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Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

V.F
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July 23, 2004


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